REACH FOR **XIENCE**™

BECAUSE YOUR STENT CHOICE LIVES WITH THEM

XIENCE™ is the DES that consistently delivers successful outcomes– not only in the cath lab, but far beyond.

Xience™

Drug-Eluting Stent System

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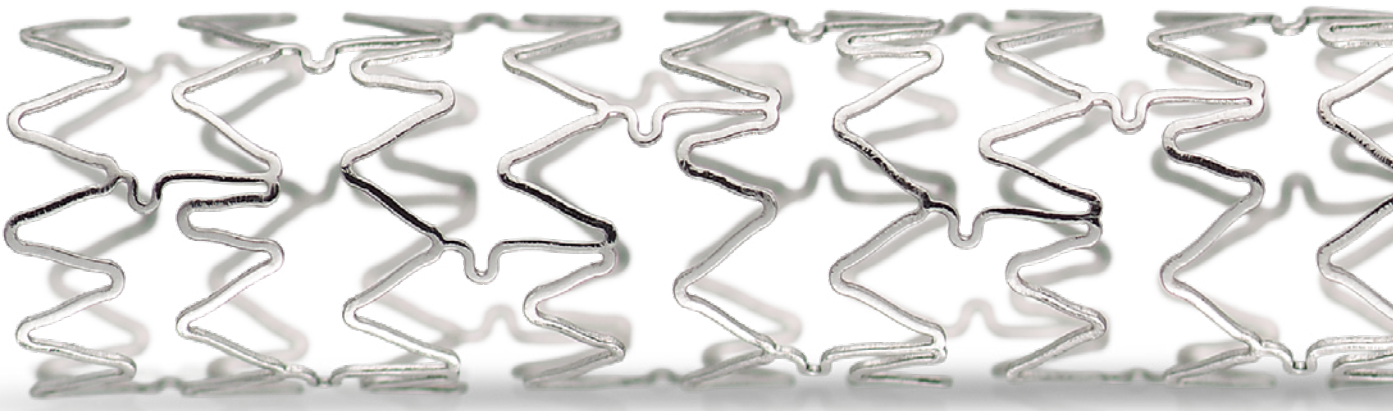
Abbott

Stent choice matters–
For the procedure and long after

When it comes to percutaneous coronary interventions (PCI), small differences between stents can be the determining factor in whether clinical success is temporary or optimal in both the short- and long-term.



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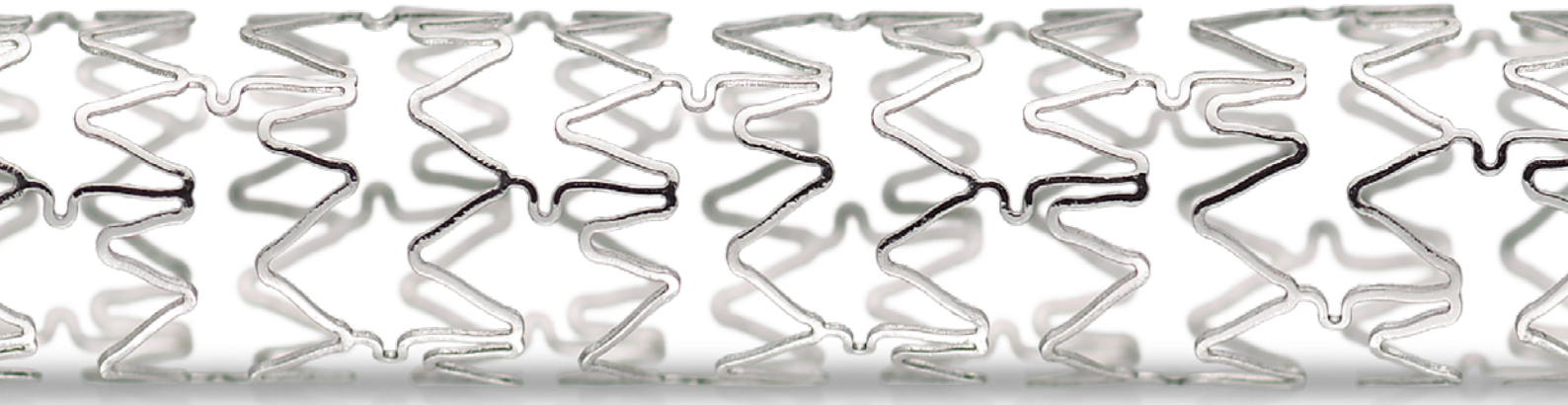
XIENCE™ Stent

1-MONTH DAPT

INDICATION FOR HIGH BLEEDING RISK PATIENTS.



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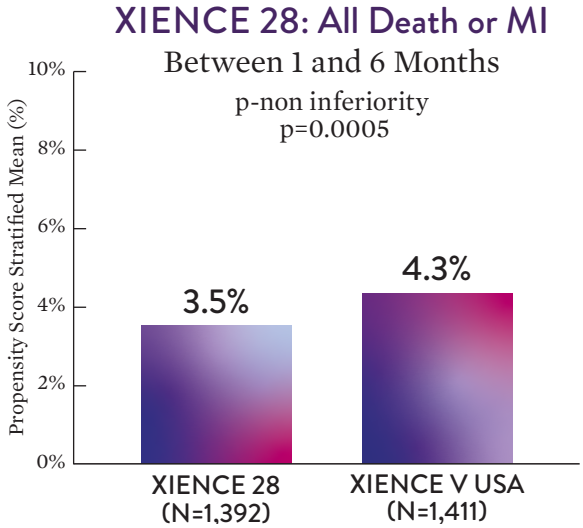
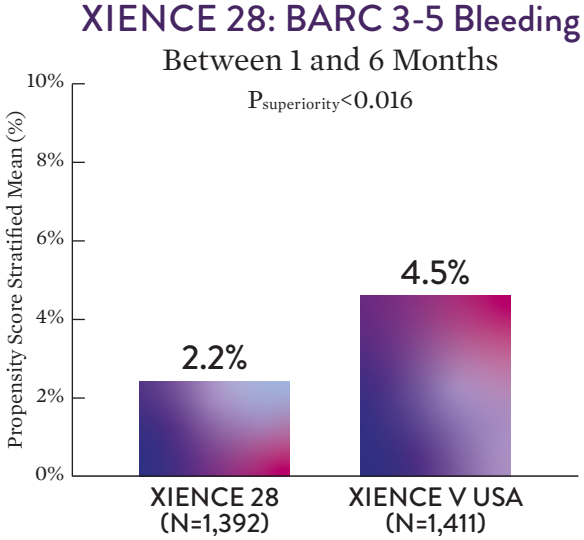
XIENCE 28

XIENCE™ Stent with 1-month DAPT reduced severe bleeding with no increase in ischemic events.[1]



XIENCE™ Stent with 1-month DAPT showed no increase in ischemic events versus 6-month DAPT – all death or MI.[1]

XIENCE 28 met its primary non-inferiority endpoint and included over 1,600 high bleeding risk patients.[1]



XIENCE™ Stent with 1-month DAPT had a significantly lower rate of severe bleeding versus 6-month DAPT. (BARC 3-5).[1]

For BARC 2-5 – XIENCE™ Stent with 1-month DAPT showed numerically lower bleeding rate versus 6-month DAPT.[1]

Note: PS stratified analysis for BARC 3-5 bleeding was not pre-specified.
Note: BARC 2-5 was a powered secondary endpoint.

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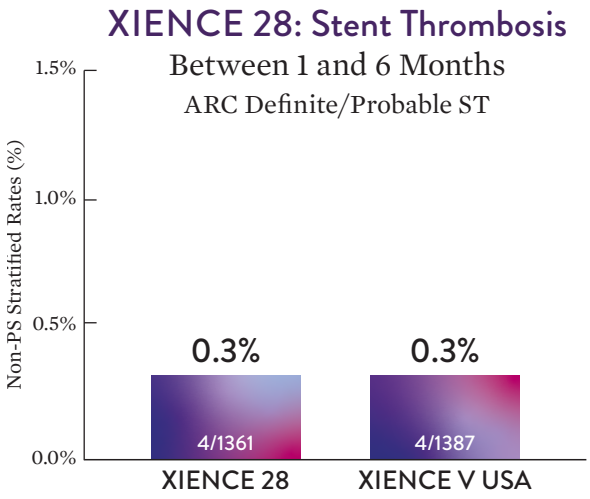
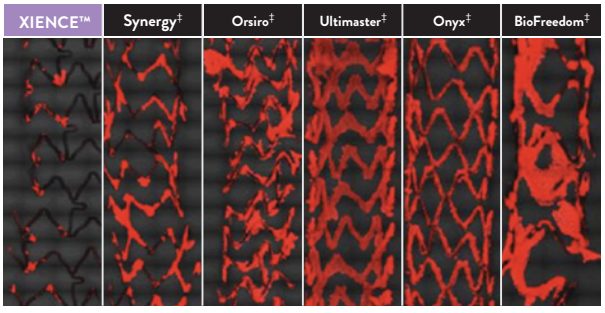
XIENCE™ Stent shows low ST rate and is significantly more anti-thrombotic than other DES.[1,3]



XIENCE™ Stent with 1-month DAPT showed no increase in ST versus 6-month DAPT.[1]

XIENCE™ Stent with 1-month DAPT had a low rate of Definite/Probable stent thrombosis of 0.3% for the 1-month DAPT group.[1]



Blood Platelet Adhesion to Stent Surface. Pre-Clinical aspirin only setting. Platelet adhesion to stent surface is involved in stent thrombosis.

XIENCE™ Stent's fluoropolymer is significantly more anti-thrombotic than other DES.[3]

XIENCE™ Stent shows significantly ($p<0.01$) less platelet adhesion vs. other DES.[2]

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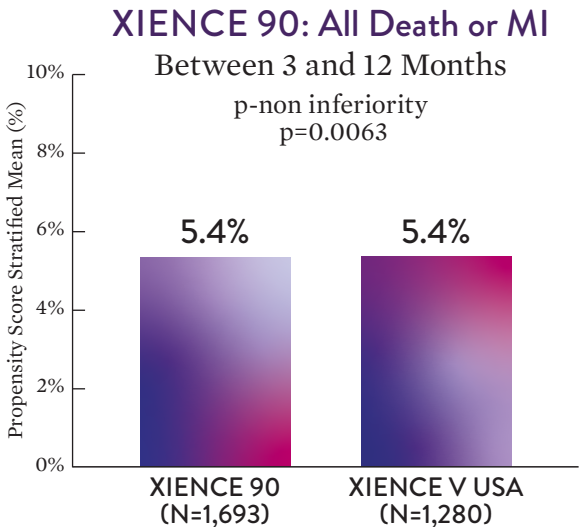
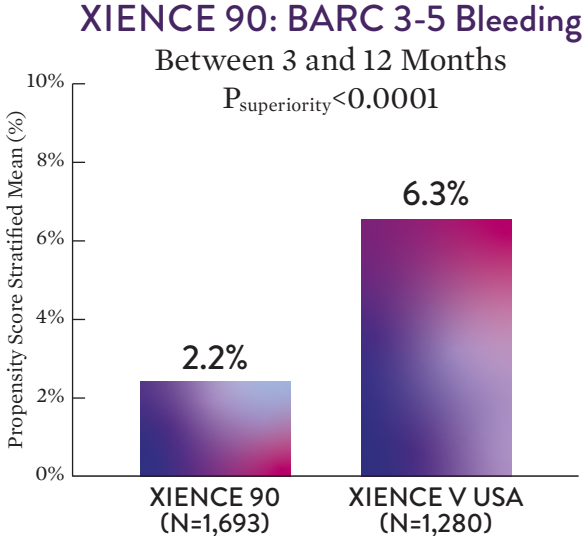
XIENCE 90

XIENCE™ Stent with 3-month DAPT reduced severe bleeding with no increase in ischemic events.[1]



XIENCE™ Stent with 3-month DAPT showed no increase in ischemic events versus 12-month DAPT – all death or MI.[1]

XIENCE 90 met its primary non-inferiority endpoint and included over 2,000 high bleeding risk patients.[1]



XIENCE™ Stent with 3-month DAPT had a significantly lower rate of severe bleeding versus 12-month DAPT. (BARC 3-5).[1]

For BARC 2-5 – XIENCE™ Stent with 3-month DAPT showed numerically lower bleeding rate versus 12-month DAPT.

Note: PS stratified analysis for BARC 3-5 bleeding was not pre-specified. BARC 2-5 was a powered secondary endpoint.

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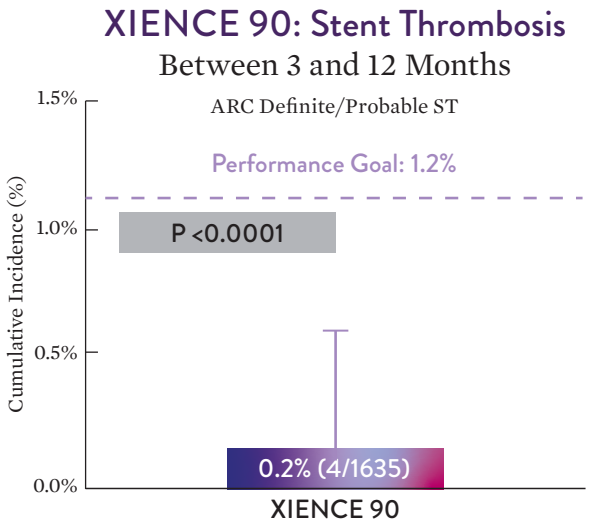
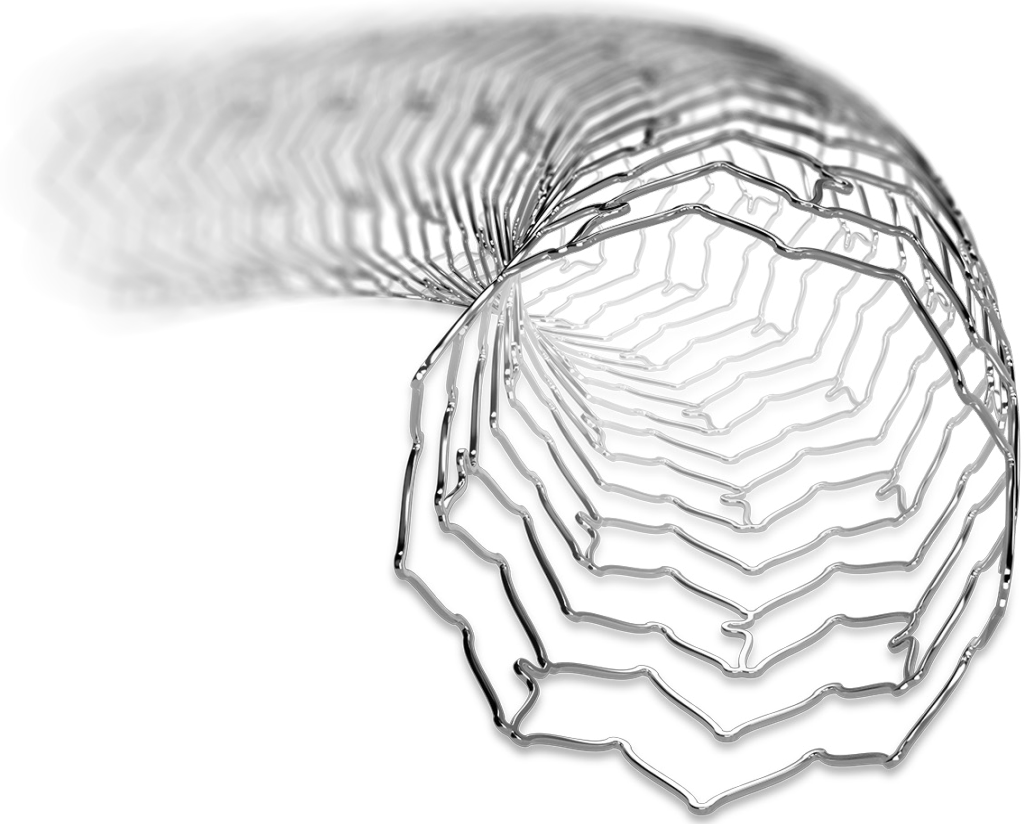
XIENCE™ Stent shows low ST rate and is significantly more anti-thrombotic than other DES.[1,3]



XIENCE™ Stent with 3-month DAPT showed low ST rate - 0.2%.[1]

XIENCE 90 met its performance goal for ST and showed a low rate of Definite/Probable stent thrombosis of 0.2% for the 3-month DAPT group.[1]



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XIENCE™ is the drug-eluting stent that consistently delivers successful outcomes–not only in the cath lab, but far beyond[2].

Unique Design | Acute Performance | Lasting Outcomes

Xience™
Drug-Eluting Stent System

REACH FOR **XIENCE**™
BECAUSE YOUR STENT CHOICE LIVES WITH THEM

1. Mehran R, et al. TCT Connect 2020 - XIENCE 28 & XIENCE 90
2. Zanchin, C. et al. *J Am Coll Cardiol Intv.* 2019;12(17):1665-1675. Serruys P, et al. *N Engl J Med*. 2010;363:136-146. Shiomi H, et al. J Am Coll Cardiol Interv. 2019;12:637-647. Kufner S, et al. *Circulation*. 2019:139(3):325-333.
3. Jinnouchi H, et al. J Am Coll Cardiol. 2019;74:Suppl B - TCT-291.

CAUTION: This product is intended for use by or under the direction of a physician. Prior to use, reference the Instructions for Use, inside the product carton (when available) or at *www.vascular.eifu.abbott* or at *medical.abbott/manuals* for more detailed information on Indications, Contraindications, Warnings, Precautions and Adverse Events.

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